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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12/10/15

COVER LETTER

Department of State
New Filing Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: DEZA RENEWALS CORP.

(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00 Filing Fee
☒ \$78.75 Filing Fee
& Certificate of Status

☐ \$78.75 Filing Fee
& Certified Copy
☐ \$87.50 Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: DEZA RENEWALS CORP.

Name (Printed or typed)

15821 SW 141 COURT

Address

MIAMI, FL 33177

City, State & Zip

786-447-6162

Daytime Telephone number

adreydeza@yahoo.es

E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

DEZA RENEWALS CORP.

The name of the corporation shall be: _____

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ARTICLE II PRINCIPAL OFFICE

Principal street address

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Mailing address, if different is: _____

15821 SW 141 COURT MIAMI, FL 33177

CLERK OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

ALL LAWFULL AND LEGAL BUSINESS

The purpose for which the corporation is organized is: _____

ARTICLE IV SHARES

100

The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: LAZLO DEZA ROZAN owner

Name and Title: _____

Address 15821 sw 141 court
miami, FL 33177

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: LAZLO DEZA ROZAN

Address: 15821 SW 141 COURT

MIAMI, FL 33177

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DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: LAZLO DEZA ROZAN

Address: 15821 SW 141 COURT

MIAMI, FL 33177

ARTICLE VIII EFFECTIVE DATE: NOV, 25 2015

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Required Signature/Registered Agent

11/25/2015
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Required Signature/Incorporator

11/25/2015
Date